

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

PAGE 1 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) 314 PAC	FEC IDENTIFICATION NUMBER ▼ C C00567800
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Joe Trippi & Associates			Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 06 / 2016	
Mailing Address 1133 15th St NW FI 12			Amount 3000.00	
City Washington	State DC	Zip Code 20005-2710	Transaction ID : VNV4W9TZHD8 Date of Disbursement or Obligation MM / DD / YYYY 11 / 06 / 2016	
Purpose of Expenditure Online Advertisement		Category/ Type		
Name of Federal Candidate Tarkanian, Danny, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>	
Calendar Year-To-Date Per Election for Office Sought		3000.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Joe Trippi & Associates			Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 06 / 2016	
Mailing Address 1133 15th St NW FI 12			Amount 1000.00	
City Washington	State DC	Zip Code 20005-2710	Transaction ID : VNV4W9TZHE6 Date of Disbursement or Obligation MM / DD / YYYY 11 / 06 / 2016	
Purpose of Expenditure Online Advertisement		Category/ Type		
Name of Federal Candidate Plumb, John, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>23</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NY</u>	
Calendar Year-To-Date Per Election for Office Sought		1000.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	4000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

May, Jennifer, , ,

[Electronically Filed]

Date

MM / DD / YYYY
11 / 07 / 2016

Signature